EXHIBIT "F" AFFIDAVIT

| THE STATE | OF TEXAS | § | |
|---|---|--|---|
| THE COUNT | YOF COUNT | & & | |
| I, <u>Bbby</u> affidavit and | AHADM hereby on oath st | , a member of the Consultate the following: | ant team, make this |
| I, and/or a p entity that w apply): | erson or persons rould be affected | related to me, have the following i by the work or decision on the P | interest in a business roject (Check all that |
| | Ownership of 10 | % or more of the voting shares of the | e business entity. |
| | Ownership of Tw | venty Five Thousand and 00/100 Denarket value of the business entity. | ollars (\$25,000.00) or |
| | Funds received income for the pr | from the business entity exceed ten revious year. | percent (10%) of my |
| | Real property is a fair market val (\$25,000.00). | involved, and I have an equitable o ue of at least Twenty Five Thousar | r legal ownership with nd and 00/100 Dollars |
| | A relative of mine that would be aff I am a member. | e has substantial interest in the businected by my business decision of the | ness entity or property e public body of which |
| | Other: | | · |
| $\underline{\hspace{1cm}}^{\hspace{1cm}}$ | None of the Abo | ve. | |
| mine, in the | first degree by c ernment Code, is | ne City of Frisco, Texas, I further af onsanguinity or affinity, as defined a member of a public body whic | in Chapter 573 of the |
| Signed this | 13+3 | day of Nov. | , 2006. |
| | | Signature of Official / Title | e president |
| are true to the | G. Pattelserry ne best of his / hei | rsigned authority, this day particles and on oath stated that the factorist knowledge or belief. | cts hereinabove stated |
| Sworn to an 2006. | d subscribed befo | re me on this 134 day of 100 | rember raie Spence |
| N 47-41-10 | Stephanie Marie Spence | Notary Public in and for the | he State of Texas |
| | My Commission Expires October 10, 2007 | My commission expires: | October 10, 2007 |

EXHIBIT "G" CONFLICT OF INTEREST QUESTIONNAIRE, FORM CIQ

| CONFLICT OF INTEREST QUESTIONNAIRE For vendor or other person doing business with local governmental entity | FORM CIQ |
|--|---|
| | OFFICE LISE ONLY |
| This questionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity. | OFFICE USE ONLY Date Received |
| By law this questionnaire must be filed with the records administrator of the local government not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. See Section 176.006, Local Government Code. | |
| A person commits an offense if the person violates Section 176.006, Local Government Code. An offense under this section is a Class C misdemeanor. | |
| Name of person doing business with local governmental entity. | |
| HUFASSOL | |
| 2 | |
| Check this box if you are filing an update to a previously filed questionnaire. | |
| (The law requires that you file an updated completed questionnaire with the appropriate September 1 of the year for which an activity described in Section 176.006(a), Local Gove not later than the 7th business day after the date the originally filed questionnaire become | rnment Code, is pending and |
| Describe each affiliation or business relationship with an employee or contractor of the local grecommendations to a local government officer of the local governmental entity with respect to the local gover | ct to expenditure of money. |
| Describe each affiliation or business relationship with a person who is a local government of employs a local government officer of the local governmental entity that is the subject of this | officer and who appoints or is questionnaire. |
| N 14 | |

Amended 01/13/2006

EXHIBIT "G" CONFLICT OF INTEREST QUESTIONNAIRE, FORM CIQ

| | CONFLICT OF INTEREST QUESTIONNAIRE For vendor or other person doing business with local governmental entity | FORM CIQ Page 2 | | | |
|---|--|-------------------------|--|--|--|
|] | Name of local government officer with whom filer has affilitation or business relationship. (Complete this section only if the answer to A, B, or C is YES.) | | | | |
| | This section, item 5 including subparts A, B, C & D, must be completed for each officer with whom the fibusiness relationship. Attach additional pages to this Form CIQ as necessary. | iler has affiliation or | | | |
| | A. Is the local government officer named in this section receiving or likely to receive taxable income from t questionnaire? | he filer of the | | | |
| | Yes No | | | | |
| | B. Is the filer of the questionnaire receiving or likely to receive taxable income from or at the direction of the officer named in this section AND the taxable income is not from the local governmental entity? | local government | | | |
| | Yes No | | | | |
| | C. Is the filer of this questionnaire affiliated with a corporation or other business entity that the local government as an officer or director, or holds an ownership of 10 percent or more? | nent officer serves | | | |
| | Yes No | | | | |
| | D. Describe each affiliation or business relationship. | | | | |
| | $\mathcal{N}_{\mathcal{I}}\mathcal{A}$ | | | | |

Describe any other affiliation or business relationship that might cause a conflict of interest.

NIA

11-13-04 Date

Amended 01/13/2006